

Conflict of Interest

CANDIDATE

Statement of Financial Interest

Deadline to file: Within 15 days after filing nominating petitions (Supreme Court Justice files within 15 days of

notifying Secretary of State of his intention to place his name on the retention ballot) or certification of convention

Candidates who file: State and Federal Office candidates (United States Senate, United States House of

Convention Nominee candidates of a party with alternative political status (US Senate, US House, Governor,

Representatives, Governor, State Legislator, circuit court judge and Supreme Court Justice SDCL 1723-18

SECRETARY OF STATE File with: The SECRETARY OF STATE except local candidates file with the office where they file their nominating

Convention Nominee candidates (Lieutenant Governor, state treasurer, attorney general, secretary state, state auditor,

Lieutenant Governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner,

Local Office candidates (county commissioner, school board member in a school district with a total enrollment of more

than 2,000 students, or commissioner, council member, or mayor in any 1st class municipality SDCL 12-25-30)

nomination.

petition.

Please print: **Full Name**

public utilities commissioner, commissioner of school and public lands SDCL 12-25-29);

commissioner of school and public lands or state legislator SDCL 12-25-29.1); and

COMPLETE Address

Office Sought (list District number if applicable) _ House

What is your occupation/profession? Manager

Business Owner

List any source of funds (business or economic relationship) which contributes more than 10% of or more than \$2,000 to your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. This also includes any enterprise in which you or an immediate family member(s) controls more than 10% of the capital or stock. Identify who receives the income from each enterprise but do not include the value. (SDCL 12-25-27)

*The intent of this form is to collect specific information, not generalities. Do not put NA or leave the grid blank,

Name of Candidate or Family Member	Name the Source of Funds (Ex: current employer, SD Legislature, 401K, benefits, etc.)	Relationship to funds (Ex: employee, officer, director, associate, partner, shareholder, owner, member, proprietor, etc.)
Carson Martavan	Direct Companies Manager	Wages - employee
Carson Mekwan	MAIN STREET INN OWNER	Profits-Owner
Courtney Merkenen	ER TOOKS Physician	employee

I declare and affirm under the penalties of perjury that the information above has been examined by me and to the best of my knowledge and belief is a true, correct and complete representation of myself and my immediate family's financial interests for the preceding calendar year.

SOUTH DAKOTA SECRETARY OF STATE • ATTENTION ELECTIONS • 500 E. Capitol Ave. • Pierre, SD 57501

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